

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 23, 1999 8:00 am
Secretary of State

02-23-1999 90111 040 ***158.75

DOCUMENT # P98000009274

1. Corporation Name
MONT CIGGARS, INC.

Principal Place of Business
7081 GRAND NATIONAL DRIVE, SUITE 117
ORLANDO FL 32819

Mailing Address
7081 GRAND NATIONAL DRIVE, SUITE 117
ORLANDO FL 32819

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/29/1998

4. FEI Number

59-3490151

Applied For
Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 3831 W. Vine St.

Suite, Apt. #, etc.

22 #6

City & State

23 Kissimmee, FL

Zip

24 34741

Country

25 USA

2a. Mailing Address

26 3831 W. Vine St

Suite, Apt. #, etc.

27 #6

City & State

28 Kissimmee, FL

Zip

29 34741

Country

30 USA

9. Name and Address of Current Registered Agent

GAYOSO, REYNALDO
7081 GRAND NATIONAL DRIVE, SUITE 117
ORLANDO FL 32819

10. Name and Address of New Registered Agent

81 Name

GAYOSO, Reynaldo

82 Street Address (P.O. Box Number is Not Acceptable)

3831 W. Vine St #6

83

84 City

Kissimmee

FL

85 Zip Code

34741

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Reynaldo N. Gayoso

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

01-07-99

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE

NAME GAYOSO, REYNALDO

STREET ADDRESS 7081 GRAND NATIONAL DRIVE, SUITE 117

CITY-ST-ZIP ORLANDO FL 32819

TITLE D ☒ DELETE

NAME ANDRADE, ANTONIO

STREET ADDRESS 7081 GRAND NATIONAL DRIVE, SUITE 117

CITY-ST-ZIP ORLANDO FL 32819

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME GAYOSO, REYNALDO

1.3 STREET ADDRESS 3831 W. Vine St #6

1.4 CITY-ST-ZIP Kissimmee, FL 34741

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME Andrade, Antonio

2.3 STREET ADDRESS 3956 TOWN CENTER BLVD #276

2.4 CITY-ST-ZIP ORLANDO, FL 32837

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Reynaldo N. Gayoso
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-07-99

Date

(407) 9444774

Daytime Phone #

CR2E034 (11/98)

0905020